

2008 Youth Flag Football Registration Form
Mt. Vernon Parks & Recreation Department
K, 1st and 2nd Graders

Please fill out this form and return to the Parks & Recreation Department Office, 118 Main Street (located upstairs at the Skating Rink) or mail to P. O. Box 324, Mt. Vernon, Indiana 47620. Office hours are Monday - Friday from 8 a.m. to 5 p.m. [closed for lunch from 12 - 12:30 p.m.] All registrations are due by Friday, August 15th, 2008 at 5 p.m. [\$5 late fee until Aug. 22nd]. **NO registrations will be accepted after this date.** Fee: \$30 per participant

Name _____

Address _____

Phone _____ Age _____ Grade K 1 2

D.O.B. _____

**Please indicate shirt size: YS YM YL S M L XL

Parent Permission:

I hereby grant permission for my child _____ to participate in the Youth Flag Football program. I will assume all responsibility and obligations for my child in case of injury or accident sustained during participation in this program. I will release the Mt. Vernon Parks Board, Department, and all other paid and voluntary personnel from any and all obligation during the course of the program. We will all try to work together to build a fine program for all of the youth involved.

Parent(s) Name - Printed _____

Address _____

Parent Signature _____

Phone #'s h) _____ w) _____ emergency) _____

e-mail _____ (for P & R distribution lists only)

We encourage everyone to volunteer regardless of their knowledge of the sport. The success of the program depends upon the volunteers. The more volunteers - the more opportunities your child will have. Coach? _____ Asst.? _____

Rec. # _____ Date Rec'd _____ By _____

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